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[TAB #12]

Attachment #10

Summary of 510(k) Submission

A. IN 1.		RMATION UBMITTER'S		
		NAME:	TILLOTSON HEALTHCARE CORPORATION	
		ADDRESS:	360 Route 101 Bedford, NH 03110 U.S.A.	
		TELEPHONE NUMBER:	(603) 472-6600	
		CONTACT PERSON:	F.W. Perrella	
		DATE SUMMARY PREPARED:	December 29, 2000	
2.	. Na	VAME OF DEVICE		
		TRADE OR PROPRIETARY NAME:	SensiGrip LTC Powder Free Examination Glove (with protein content labeling claim)	
		COMMON OR USUAL NAME:	Examination Glove	
		CLASSIFICATION NAME:	Examination Glove	
3.	. P	REDICATE DEVICE IDENTIFICATION NAME, NUMBER	1. AccuTouch Powder Free Latex	
			Examination Glove K992428	
		•		
4.	D	DESCRIPTION OF DEVICE a. HOW THE DEVICE FUNCTIONS:		
	a			
	Natural Rubber Latex films form a barrier to body fluids and bloodborne pathogens.			
		patnogens.		
	b.	b. SCIENTIFIC CONCEPTS THAT FORM THE BASIS FOR THE DEVICE: The latex rubber is water tight under normal conditions of use. It's tensile properties cause it to conform to the hand, allowing movements necessary for a medical procedure.		
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		moutan processio		

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510(k) Number: KDO 4048

c. PHYSICAL AND PERFORMANCE CHARACTERISTICS SUCH AS DESIGN, MATERIALS
AND PHYSICAL PROPERTIES:

Natural Rubber Latex is known to create a barrier to bloodborne pathogens and and body fluids. ASTM conforming tensile properties create a glove that is strong and flexible. The leaching process removes traces of chemical accelerants that may be chemically irritating. The glove is manufactured in accordance with the requirements of ASTM D3578-99 and ASTM D5151-99 requirements.

5. STATEMENT OF INTENDED USE, INCLUDING DESCRIPTION OF THE DISEASES OR CONDITIONS THAT THE DEVICE WILL ADDRESS

This is a disposable device, intended for medical purposes, that is worn on the examiner's hand to prevent contamination between patient and examiner.

Examination gloves with protein content labeling are suitable in situations where healthcare worker or patient allergic sensitivity may be a factor.

6. EXPLANATION OF SIMILARITIES OR DIFFERENCES TO PREDICATE DEVICE

It is a powder free glove in the same way as the predicate product with a synthetic inner coating and a protein content labeling claim, but with an additional chlorination post process.

B. IF THE DECISION BASED ON PERFORMANCE DATA

1. DISCUSSION OF NON-CLINICAL TESTS

	SPECIFICATION	PROPOSED Powder Free	PREDICATE Powder Free
		(with protein content labeling)	(with protein content labeling)
	PERFORMANCE STANDARDS	ASTM D3578-00	ASTM D3578-95
	WATER TIGHTNESS	ASTM D5151-99	ASTM D5151-92
	RESIDUAL PROTEIN	ASTM D5712-99	ASTM D5712-99
	RESIDUAL POWDER	ASTM D6124-00	ASTM D6124-97
	RESIDUAL ANTIGENIC PROTEIN	ASTM D6499-00	NA
2.	DISCUSSION OF CLINICAL TESTS		
	SPECIFICATION SAFETY	PROPOSED	PREDICATE
	RABBIT IRRITATION	Passes	Passes
	GUINEA PIG SENSITIZATION	Passes	Passes

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3. CONCLUSIONS DRAWN FROM NONCLINICAL AND CLINICAL TESTS THAT DEMONSTRATE SAFETY EFFECTIVENESS, AND PERFORMANCE =/> PREDICATE PRODUCT

The SensiGrip LTC Powder Free Examination Glove has been carefully compared to legally marketed devices in the 510(k). The data summaries indicate that the proposed product meets or exceeds acceptable scores for the predicate product in nonclinical tests, and satisfies the requirements for a safe and effective, Powder Free (with protein content label) medical glove.

Pursuant to 21 C.F.R. 807.87 (j), I, F.W. Perrella, Ph.D., Vice President R&D certify that to the best of my knowledge and belief and based upon the data and information submitted to me in the course of my responsibilities as the V.P. R&D for TILLOTSON HEALTHCARE CORPORATION, and in reliance thereupon, the data and information submitted in this of the substantial equivalence of this device have been knowingly omitted from this Submission.

F.W. Perrella, Ph.D. Vice President R&D



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

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Mr. Frank W. Perrelle Vice President of Research & Development Tillotson Healthcare Corporation 360 Route 101 Bedford, New Hampshire

Re: K004048

Trade Name: Sensigrip LTC Powder Free Latex Examination

Glove with Protein Content Labeling Claim

(50 Micrograms or Less)

Regulatory Class: Product Code: LYY

Dated: December 29, 2000 Received: December 29, 2000

Dear Mr. Perrelle:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic QS inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does

not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4692. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsma/dsmamain.html".

Sincerely yours,

Timothy A. Ulatowski

Director

Division of Dental, Infection Control and General Hospital Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

510(k) Number:						
3.0 Indications for Use Statement: Include the following or equivalent Indications for Use page. The information, data and labeling claims in the entire the 510(k) submission must support and agree with the Indications for Use statement.						
INDICATIONS FOR USE						
Applicant: Tillotson Healthcare Corporation						
5 10(k) Number (if known):* KOO4048						
Device Name: SensiGrip LTC Powder Free Latex Examination Glove, with Protein Content Labeling Claim (50 Micrograms Or Less Per Gram Of Glove)						
Indications For Use:						
The SensiGrip LTC Powder Free Examination Glove is "a disposable device intended for medical purposes that is worn on the examiner's hand to prevent contamination between patient and examiner.". (21CFR 880.6250).						
(PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED) Concurrence of CDRH Office of Device Evaluation (ODE)						
Prescription Use OR Over-The-Counter						
For a new submission, do NOT fill in the 510(k) number blank.						
(Division Sign-Off) Division of Dental, Infection Control,						
Page 6 of 37 Page 6 of 37 Page 8 of 37 Stock Number						

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